DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION

As a below named inventor, I hereby declare that:

My residence/post office address and citizenship are as stated below next to my name;

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and

patent is sought on the in	nvention e	ntitled:	e subject matter wh	nich is claimed and for which a
System and Method for T		-		
the specification of whic				
() was filed on		as US Applic	cation No. or PCT In	ternational Application
Number		and was amende	ed on	(if applicable).
I hereby state that I havincluding the claims, as disclose all information w	amended	by any amendmen	t(s) referred to abo	e above-identified specification, ve. I acknowledge the duty to CFR 1.56.
Foreign Application(s) and/or C I hereby claim foreign priority inventor(s) certificate listed be a filing date before that of the	benefits und	ler Title 35, United Stat e also identified below a	ıny foreign application fo	any foreign application(s) for patent or r patent or inventor(s) certificate having
COUNTRY		APPLICATION NUMBER	DATE FILED	PRIORITY CLAIMED UNDER 35 U.S.C. 119
				YES: NO:
				YES: NO:
Provisional Application			·	
I hereby claim the benefit und below:	der Title 35,	United States Code Sec	ction 119(e) of any Unite	ed States provisional application(s) listed
Γ	APPL	ICATION NUMBER	FILING DATE	
-				
			-	
insofar as the subject matter	of each of th paragraph of 37, Code of	ne claims of this applica Title 35, United States Federal Regulations, Se	ition is not disclosed in t Code Section 112, I ac ection 1.56(a) which occi	d States application(s) listed below and, the prior United States application in the knowledge the duty to disclose material urred between the filing date of the prior
APPLICATION NUMBER		FILING DATE STATUS (patented/pending/abandoned)		(patented/pending/abandoned)
		<u> </u>		
POWER OF ATTORNEY: As a named inventor, I here business in the Patent and Tra Customer N	demark Offic	the following attorney(see connected therewith:	Place Customer Number Bar Code Label here	osecute this application and transact all
Send Correspondence to:			Direct Teleph	one Calls To:
HEWLETT-PACKARD COMPANY Intellectual Property Administration P.O. Box 272400			William P. O	
Fort Collins, Colorado 80	527-2400		(970) 898-7	917
made on information a	nd belief hat willful under Sei	are believed to be false statements ction 1001 of Title	true; and further the and the like so not 18 of the United S	e are true and that all statements hat these statements were made nade are punishable by fine or states Code and that such willfultent issued thereon.
Full Name of Inventor: Ryan Clarence Thompson Citizenship: USA				
Residence: 443 Sundisk Dr., Loveland, CO 80538, USA				
Post Office Address: 44	3 Sundisk	Dr., L veland, CO	80538, USA	
An Clay			_ 9/2	4/03

Rev 05/03 (DecPwr)

DECLARATION AND POWER OF ATTORNEY FOR PATENT APPLICATION (continu d)

ATTORNEY DOCKET NO. 200209135-1

Full Name of # 2 joint inventor:	John Warren Maly		Citizenship: USA			
Residence:	13500 Owl Canyon Trail, Laporte CO 80535, USA					
Post Office Address:	13500 Owl Canyon Trail, Laporte CO 80535, USA					
(hhhum)	9/24/03					
Inventor's Signature		Date	1,40,			
,						
Full Name of # 3 joint inventor:	Zachary Steven Smith		Citizenshi <u>p:</u> USA			
Residence:	3819 Benthaven St., Fort Collins, CO 80526, USA					
Post Office Address:	3819 Benthaven St., Fort Collins, CO 80526, USA					
7	<u> </u>	9.	24-2003			
Inventor's Signature		Date				
Full Name of # 4 joint inventor:			Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date	A			
		Date				
Full Name of # 5 joint inventor:			Citizanahina			
			Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				
Full Name of # 6 joint inventor:	:		Citizenship:			
Residence:						
Post Office Address:						
1 03t Office Address.	·····					
Inventor's Signature		Date	***************************************			
Full Name of # 7 joint inventor:	:		Citizenship:			
Residence:						
Post Office Address:	· · · · · · · · · · · · · · · · · · ·					
Inventor's Signature		Date				
Full Name of # 8 joint inventor	:		Citizenship:			
Residence:						
Post Office Address:						
Inventor's Signature		Date				